Case 22-33675 Document 15-1 Filed in TXSB on 12/21/22 unReagatts of lines

Debtor 1

Andre
First Name

Debtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of Texas

Case number

Southern District of Texas

DEC 2 1 2022

Nathan Ochsner, Clerk of Court

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

any additional pages, write your name and case nur	nber (if known).	
Part 1: List All of Your PRIORITY Unsecure	d Claims	
nonpriority amounts. As much as possible, list the c	editor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's neart 1. If more than one creditor holds a particular claim.	at claim here and show both priority and ame. If you have more than two priority
Plorida Department of Transportation Priority Creditor's Name SunPass Replenishments and Invoice Number Street P.O. Box 31241 Tampa FL 33631 City State ZiP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number	\$ <u>1,255.00</u> \$ <u>1,255.00</u> \$
2.2 New York DMV Priority Creditor's Name DRA Processing Center Number Street State Office Building Utica NY 13503 City State ZIP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 0 3 1 6 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	,

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Debtor 1 Andre L Lewis Case number (# known)_____

listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
Mamaroneck Village Court	Last 4 digits of account number	\$ <u>175.00</u>	\$ <u>175.00</u>	\$
Priority Creditor's Name 169 Mt. Pleasant Avenue Number Street	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
Manager 10540	_			
Mamaorneck NY 10543 City State ZIP Code	☐ Contingent ☑ Unliquidated			
	Disputed			
Who Incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
Is the claim subject to offset?	Other. Specify			
Yes				
Collector of Taxes	Last 4 digits of account number 7 5 8 7	\$ <u>1,792.62</u>	\$ <u>1,792.62</u>	\$
Priority Creditor's Name P.O. Box 50				
Number Street	When was the debt incurred? 01/01/2020			
	As of the date you file, the claim is: Check all that apply.			
Stamford CT 06904	☐ Contingent			
City State ZIP Code	Unliquidated			
Who Incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were	•		
$oldsymbol{\square}$ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
☑ No				
☐ Yes	<u> </u>			
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Thomas Goddon Straine	When was the debt incurred?			
Number Street				
-	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who incurred the debt? Check one.	□ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
☐ At least one of the deptors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
le the elejas gublect to effect?	Other. Specify			
Is the claim subject to offset?				
□ No □ Yes				

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Debtor 1

ndre	L	Lewis	Case number (# known)
			· · · · · · · · · · · · · · · · · · ·

Pai	List All of Your NUNPRIORITY Uns	ecurea Ciaims		
3.	Do any creditors have nonpriority unsecured cl	alms against vo	ц?	
	No. You have nothing to report in this part. Sub	•		
	Ves		o court was your cases concension	
			and the second of the second o	
			order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not	
			list the other creditors in Part 3.If you have more than three no	
	claims fill out the Continuation Page of Part 2.	- ,		
-	<u> </u>	-		1
				Total claim
.1	Excelsior University		Last 4 digits of account number	s 1,400.00
	Nonpriority Creditor's Name		When was the debt incurred? 01/01/2021	\$
	7 Columbia Cir		When was the debt incurred? 01/01/2021	ļ
	Number Street		_	
	Albany NY	12203	- A - AA- data con Sta the state to Observe with a contract	ì
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
			☐ Contingent	
	Who Incurred the debt? Check one.		☑ Unliquidated	
	☑ Debtor 1 only		☐ Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		☑ Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt		that you did not report as priority claims	
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other. Specify	
	☐ Yes			
.2			I - 4 4 31-34 - 8 4	\$
.4	M		Last 4 digits of account number	a
	Nonpriority Creditor's Name		When was the debt incurred?	
			_	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code		
	Side Side Side Side Side Side Side Side	211 0000	☐ Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONDRIORITY unacquired elelent	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	•		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other, Specify	1
	□ No		Coller, Specify	
	☐ Yes			
.3			Last 4 digits of account number	
	Nonpriority Creditor's Name			\$
			When was the debt Incurred?	
	Number Street		_	
			An of the date way file the claim les Charle Mithet and	
	City State	ZIP Code	 As of the date you file, the claim is: Check all that apply. 	
	Who Incurred the debt? Check one.		☐ Contingent	
	Debtor 1 only		☐ Unliquidated	
	Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only			
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	_		☐ Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	is the claim subject to offset?		that you did not report as priority claims	
	□ No		Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		Other. Specify	

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Debtor 1

Andre	L		Lewis	Case number (if known)
First Name	Middle Name	Last Name	_	

Ilata	th & 4 fallowed by 4 E and an farth	 Total cla
listing any entries on this page, number them beginning wit	th 4.4, tollowed by 4.5, and so forth.	Hotal cla
	Last 4 digits of account number	\$
Nonpriority Creditor's Name		Ψ
Number Street	<u> </u>	
	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	To a Champiopity was a seed alsies.	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
_	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify	
□ No		
☐ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt Incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Miles Insured the debte Observes	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	 Student toans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	 ,	
Number Street	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who Incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify	
□ No		
Yes		

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Debtor 1

Andre	L	Lewis	Case number (if known)_
	Milato Nome	Lost Nome	· · · · · · · · · · · · · · · · · · ·

Part 8: List Others to Be Notified About a Debt That You Already Listed

Department of Treasur	<u> </u>	.	On which entry in Part 1 or Part 2 did you list the original creditor?
1500 Pennsylvania Ave	enue. NW		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			□ Part 2: Creditors with Nonpriority Unsecured Clai
Mashinatan	DC	20220	Last 4 digits of account number 7 5 8 7
Washington	State	ZIP Code	
ony	State	Zir Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	-		· · · · · · · · · · · · · · · · · · ·
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
		-	Last 4 digits of account number
City	State	ZIP Code	Last 4 digits of decount frame.
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
uonto			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
_			Claims
City	State	ZIP Code	Last 4 digits of account number
	State	217 0008	On which onto in Part 4 or Part 2 did you list the original studitor?
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	-		☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City	State	ZIP Code	Leas - Minico de Gregorie Hulliuti

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Debtor 1

ndre L Lewis
st Name Middle Name Last Name

Case number (# known)_____

	7.1
	-2

Add the Amounts for Each Type of Unsecured Claim

Add the a	amounts of certain types of unsecured claims. This inform imounts for each type of unsecured claim.	ation is	for statistical reporting purposes only. 28 U.S.C. § 159.
		:	— Total claim
otal claims	6a. Domestic support obligations	6 a.	\$
om Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$4,548.62
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e. Total . Add lines 6a through 6d.	6e.	\$
		,	Total claim
tal claims	6f. Student loans	6f.	\$ 1,400.00
m Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ <u>\$</u>
	6j. Total. Add lines 6f through 6i.	6j.	\$ 5,948.62